

APPLICATION DATA SHEET

10/567939

APPLICATION INFORMATION

Application Date:: 08/11/04
Application Type:: REGULAR
Subject Matter:: UTILITY
CD-ROM or CD-R?:: NONE
Title:: COMPOSITIONS AND METHODS FOR
THE TREATMENT OF IMMUNE
RELATED DISEASES
Attorney Docket Number:: P2053R1-1
Total Drawing Sheets:: 0

IAP5Rcc'd PCT/PTO 09 FEB 2006

INVENTOR INFORMATION

Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	USA
Status::	FULL CAPACITY
Given Name::	Alexander
Family Name::	Abbas
City of Residence::	Oakland
State or Province of Residence::	CA
Country of Residence::	USA
Street of Mailing Address::	6087 Ocean View Drive
City of Mailing Address::	Oakland
State or Province of Mailing Address::	CA
Country of Mailing Address::	USA
Postal or Zip Code of Mailing Address::	94618-1844
Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	USA
Status::	FULL CAPACITY
Given Name::	Hilary
Family Name::	Clark
City of Residence::	San Francisco
State or Province of Residence::	CA
Country of Residence::	USA
Street of Mailing Address::	1504 Noe St.
City of Mailing Address::	San Francisco
State or Province of Mailing Address::	CA
Country of Mailing Address::	USA
Postal or Zip Code of Mailing Address::	94131
Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	CN/USA
Status::	FULL CAPACITY
Given Name::	Wenjun
Family Name::	Ouyang
City of Residence::	Foster City
State or Province of Residence::	CA
Country of Residence::	USA
Street of Mailing Address::	1057 Galley Lane
City of Mailing Address::	Foster City
State or Province of Mailing Address::	CA
Country of Mailing Address::	USA
Postal or Zip Code of Mailing Address::	94404

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: USA
Status:: FULL CAPACITY
Given Name:: Mickey
Middle Name:: P.
Family Name:: Williams
City of Residence:: Half Moon Bay
State or Province of Residence:: CA
Country of Residence:: USA
Street of Mailing Address:: 509 Alto Avenue
City of Mailing Address:: Half Moon Bay
State or Province of Mailing Address:: CA
Country of Mailing Address:: USA
Postal or Zip Code of Mailing Address:: 94019

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: USA
Status:: FULL CAPACITY
Given Name:: William
Middle Name:: I.
Family Name:: Wood
City of Residence:: Cupertino
State or Province of Residence:: CA
Country of Residence:: USA
Street of Mailing Address:: 15060 Montebello Rd.
City of Mailing Address:: Cupertino
State or Province of Mailing Address:: CA
Country of Mailing Address:: USA
Postal or Zip Code of Mailing Address:: 95014

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: USA
Status:: FULL CAPACITY
Given Name:: Thomas
Middle Name:: D.
Family Name:: Wu
City of Residence:: San Francisco
State or Province of Residence:: CA
Country of Residence:: USA
Street of Mailing Address:: 41 Nevada St.
City of Mailing Address:: San Francisco
State or Province of Mailing Address:: CA
Country of Mailing Address:: USA
Postal or Zip Code of Mailing Address:: 94110

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 00000

Correspondence Customer Number:: 09157

REPRESENTATIVE INFORMATION

Representative Customer Number:: 00000

DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of 9	PCT/US2004/02624 9	08/11/04
PCT/US2004/02624 9	119(e) of	60/493,546	08/11/03

FOREIGN PRIORITY INFORMATION

ASSIGNMENT INFORMATION